PART I RELEASE *					
			(For 1	Non-CAP Me	embers)
KNOW	ALL	MEN	BY	THESE	PRESENTS: WHEREBY I, ut to take a flight or flights in certain Civil Air
consideration officers and administration officers, agains are sult of as a result of the consideration of the con	on of the perrad agents to ors release and emotion, on according the neglige	mission extend take said flight and forever disc ployees acting ount of my dea ance of the Civ	led to me be ght or flight or flight or the ground of the control	y aircraft on wn initiative, by the Civil A ghts, I do he Civil Air Patror otherwise, ficcount of any tol/United State	or about and risk, and responsibility; now, therefore, in air Patrol/United States of America through its ereby for myself, my heirs, executors, and rol, Inc./United States of America, and all its from any and all claims, demands, actions, or injury to me or my property which may occur tes of America, its agents or employees during and and flight operations incident thereto.
DATE					
					(SIGNATURE OF RELEASOR)
(SIC	SNATURE OI	F WITNESS)	(NAME OF PE	ERSON TO BE NOTIFIED IN EMERGENCY)
(SIC	SNATURE OI	F WITNESS)		(ADDRESS (OF PERSON TO BE NOTIFIED IN EMERGENCY)
PART II RELEASE * (For Parents of Minors)					
KNOW ALL MEN BY THESE PRESENTS: WHEREBY my child(ren), is (are) about to take a flight or flights in certain Civil Air Patrol/United States of America instrumentality aircraft on or about and whereas am doing so entirely upon my own initiative, risk, and responsibility; and with full knowledge and approval; now, therefore, in consideration of the permission extended to my child(ren) by the Civil Air Patrol/United States of America through its officers and agents to take said flight or flights, I do hereby for myself, my heirs, executors, and administrators release and forever discharge the Civil Air Patrol, Inc./United States of America, and all its officers, agents, and employees acting official or otherwise, from any and all claims, demands, actions, or causes of action, on account of the death or on account of any injury to my child(ren) or my property which may occur as a result of the negligence of the Civil Air Patrol/United States of America, its agents or employees during said flight or flights or continuances thereof, as well as all ground and flight operations incident thereto.					
DATE				(S	SIGNATURE OF PARENT/GUARDIAN) **
(SIC	SNATURE OI	F WITNESS)			(SIGNATURE OF PARENT/GUARDIAN) **
(SIC	SNATURE O	F WITNESS)		-	
* Complete app ** All parents/g			1.		